TRAVEL CLAIM MUNICIPALITY OF HE DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

Janet Peitzsche	
\$0.570	
Deputy Warden	
	\$0.570

Period Covered				
by This Report	01-Jun-23	to	30-Jun-23	

			Barrie	ME	ALS		MEALS	HOTEL OR		KILOMETERS		
MONTH/DATE	DETAILS OF TRAVEL	GL#	В	L	D	Day	TOTAL	LODGING	OTHER	TRAVELLED	MILEAGE	TOTAL
June 7	cow	10 211 1132 200160								102.00	\$58.14	\$58.14
June 19	Doug Griffiths CLC	10 211 1132 200160								102.00	\$58.14	\$58.14
June 21	Council	10 211 1132 200160								102.00	\$58.14	\$58.14
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										
		10 211 1132 200160										(e)
		10 211 1132 200160										

COLUMN TOTALS	306.00	\$174.42	\$174.42

I nereby certify that the whole of the expenditure stated in the foregoing account was actually and necessarily incurred on Municipal business and that these expenses comply with Municipal expense gludelines published as Policy G-10 and that none of these expenses nave been or will be reimbursed from any other sources of funds.

Signature of Claimant



REQUIRED ADMINISTRATIVE APPROVALS

I ACKNOWLEDGE RESPONSIBILITY THAT AL EXPENDITURES ARE VALID, IN COMPLIANC WITH THE POLICIES OF THE MUNICIPALITY THAT SUFFICIENT FUNDS ARE AVAILABLE COVER THE EXPENDITURES.

Director/CAO	Date

Date

Director of Finance

TRAVEL CLAIM MUNICIPALITY C 1E DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

CLAIMANT	Councillor Mary Desmond	
RATE	\$0.570	
TITLE	Councillor	

by This Report	June 1, 2023	to	June 30, 2023

			ME	ALS	455	MEALS	HOTEL OR		KILOMETERS		
DETAILS OF TRAVEL	GL#	В	L	D	Day	TOTAL	LODGING	OTHER	TRAVELLED	MILEAGE	TOTAL
Regular Monthly Council	10 211 1132 200130								66.00	\$37.62	\$37.62
	10 211 1132 200130										
	10 211 1132 200130										
	10 211 1132 200130										
	10 211 1132 200130										
				-							
	Regular Monthly Council	Regular Monthly Council 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130	Regular Monthly Council 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130	DETAILS OF TRAVEL GL# B L	Regular Monthly Council 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130 10 211 1132 200130	DETAILS OF TRAVEL GL# B L D Day	DETAILS OF TRAVEL GL# B L D Day TOTAL	DETAILS OF TRAVEL GL# B L D Day TOTAL LODGING Regular Monthly Council 10 211 1132 200130 <	DETAILS OF TRAVEL GL# B L D Day TOTAL LODGING OTHER	DETAILS OF TRAVEL GL# B L D Day TOTAL LODGING OTHER TRAVELLED	DETAILS OF TRAVEL GL# B L D Day TOTAL LODGING OTHER TRAVELLED MILEAGE

COLUMN TOTALS 66.00 \$37.62	\$37.62

I hereby certify that the whole of the expenditure
stated in the foregoing account was actually and
necessarily incurred on Municipal business and that
these expenses comply with Municipal expense giudelines
published as Policy C-10 and that none of these expenses
have been or will be reimbursed from any other sources of funds.

Signature of Claimant



REQUIRED ADMINISTRATIVE APPROVALS

I ACKNOWLEDGE RESPONSIBILITY THAT AL EXPENDITURES ARE VALID, IN COMPLIANCE WITH THE POLICIES OF THE MUNICIPALITY, THAT SUFFICIENT FUNDS ARE AVAILABLE T COVER THE EXPENDITURES.

Director/CAO	Date
Director of Finance	Date

TRAVEL CLAIM MUNICIPALITY C HE DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

CLAIMANT	Neil Decoff	
RATE	\$0.570	
TITLE	Councillor	

Period Covered			
by This Report	01-Jun-23	to	30-Jun-23

				ME	ALS		MEALS	HOTEL OR		KILOMETERS		
MONTH/DATE	DETAILS OF TRAVEL	GL#	В	L	D	Day	TOTAL	LODGING	OTHER	TRAVELLED	MILEAGE	TOTAL
June 7	COW & DOT	10-211-1132-200140								38	\$21.66	\$21.66
June 15	TAG	10-211-1132-200140								38	\$21.66	\$21.66
June 19	Doug Griffith @ CLC	10-211-1132-200140								38	\$21.66	\$21.66
June 21	Regular Monlthy Council	10-211-1132-200140								38	\$21.66	\$21.66
June 27	ERSWM	10-211-1132-200140								38	\$21.66	\$21.66
		10-211-1132-200140										
										0		

I hereby certify that the whole of the expenditure stated in the foregoing account was actually and necessarily incurred on Municipal business and that these expenses comply with Municipal expense giudelines

published as Policy C-10 and that none of these expenses

have been or will be reimbursed from any other sources of funds.

Signature of Claimant

COLUMN TOTALS

Municipality of the District of Guysborough

REQUIRED ADMINISTRATIVE APPROVALS

\$108.30

190.00

I ACKNOWLEDGE RESPONSIBILITY THAT ALI EXPENDITURES ARE VALID, IN COMPLIANCE WITH THE POLICIES OF THE MUNICIPALITY / THAT SUFFICIENT FUNDS ARE AVAILABLE TO COVER THE EXPENDITURES.

Director/CAO	Date

Director of Finance

Date

\$108.30

TRAVEL CLAIM MUNICIPALITY C 1E DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

CLAIMANT	Hudson MacLeod
RATE	0.570
TITLE	Councillor

Period Covered			
by This Report	June 1,2023	to	30-Jun-23

				ME	ALS		MEALS	HOTEL OR		KILOMETERS		
MONTH/DATE	DETAILS OF TRAVEL	GL#	В	L	D	Day	TOTAL	LODGING	OTHER	TRAVELLED	MILEAGE	TOTAL
June 7	MLS, DOT & COW	10-211-1132-200180								124.00	\$70.68	\$70.6
		10-211-1132-200180										
		10-211-1132-200180										
		10-211-1132-200180										
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		10-211-1132-200180										
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COLUMN TOTALS 124.00 \$70.68 **\$70.68**

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Signature of Claimant



REQUIRED ADMINISTRATIVE APPROVALS

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Director/CAO	Date

Director of Finance

TRAVEL CLAIM MUNICIPALITY O. HE DISTRICT OF GUYSBOROUGH

THE INFORMATION REQUIRED IN BLOCKS MUST BE COMPLETED. DO NOT COMPLETE SHADED AREAS.

Fin Armsworthy	
\$0.570	
Councillor	
	\$0.570

by This Report 01-Jun-23 to 30)-Jun-23

				ME	ALS	AMIL	MEALS	HOTEL OR		KILOMETERS		
MONTH/DATE	DETAILS OF TRAVEL	GL#	В	L	D	Day	TOTAL	LODGING	OTHER	TRAVELLED	MILEAGE	TOTAL
June 6	GALA	10-211-1132-200190								98.00	\$55.86	\$55.86
June 7	MLS, DOT & COW	10-211-1132-200190								98.00	\$55.86	\$55.86
June 21	Regular Monthly Council	10-211-1132-200190								98.00	\$55.86	\$55.86
June 29	Home Care Support Board	10-211-1132-200190								98.00	\$55.86	\$55.86
		10-211-1132-200190										
		10-211-1132-200190										

COLUMN TOTALS	392.00	\$223.44	\$223.44

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Signature of Claimant



REQUIRED ADMINISTRATIVE APPROVALS

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Director of Finance	Date
Director/CAO	Date